

# Walnut Park Elementary School

P.O. Box 2649, Smithers, British Columbia V0J 2N0

Telephone (250) 847-4464

email: wpsoffice@sd54.bc.ca

Jaksun Grice  
Principal

De-Anna Lea  
Vice Principal

## SPORTS & FIELD TRIP PERMISSION FORM

DESCRIPTION OF ACTIVITY: **Gymnastics**

LEARNING OBJECTIVES: **Physical Health Education/Physical Literacy**

DATE & TIMES: **Wednesday, April 8, 15 and 29 \*leave @ 1:00 & back by 3:00pm AND May 6<sup>th</sup> 9:00-10:45**

TRANSPORTATION: **Walking**

SUPERVISING TEACHER: **Ms. Wilson**

EMERGENCY CONTACT: **Jaksun Grice, Principal**

Field Trip approval: \_\_\_\_\_



COST: **\$15.00 per student for all 4 sessions**

### ADDITIONAL INFORMATION:

Students should bring a water bottle and wear comfortable, loose clothing. There are no change rooms at the club. Siblings are not permitted to come with parent volunteers. This policy ensures the safety of all participants. Thank you for your understanding.



1621 Main Street, Smithers BC  
(250) 847 - 3547

[smitherssaltosgymnastics@gmail.com](mailto:smitherssaltosgymnastics@gmail.com)

[facebook.com/smitherssaltosgymnasticsclub](https://facebook.com/smitherssaltosgymnasticsclub)

## ASSUMPTION AND ACKNOWLEDGMENT OF RISKS FOR MINORS

### PLEASE READ CAREFULLY

**RE:** Use of Premises and Equipment of the Bulkley Valley Gymnastics Association

**TO:** Bulkley Valley Gymnastics Association operating as Smithers Saltos Gymnastics (referred to in this document as Smithers Saltos Gymnastics) and its directors, officers, employees, representatives, officials, landlord and agents (collectively referred to in this document as the "Agents").

**I have read the guidelines and rules issued for the use of Smithers Saltos Gymnastics premises and equipment, which I understand, and I agree to be bound by them. I further agree to acknowledge that:**

1. The rules and guidelines governing the use of the premises and equipment are solely for that purpose, that is, for the use of gymnastics activities, and it remains my sole responsibility to act and govern myself in such a manner as to be responsible for my own safety;
2. I am aware of the risks inherent in participating in gymnastics activities and the use of gymnastics premises, facilities and equipment and I assume the risks and waive notice of all conditions, dangers or otherwise relating to or arising out of such use.

### General Gym Rules

- Do gymnastics safely
- Ask your coach's permission before getting on equipment
- Ask your coach's permission before attempting new skills
- If you leave the class, tell your coach
- Be cautious and aware of your surroundings when moving in gym

Participant's name: \_\_\_\_\_

Parent / Guardian Signature: \_\_\_\_\_

Witness Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Gymnastics BC**  
play | perform | progress

230 - 3820 Cessna Drive, Richmond, BC V7B 0A2  
phone: 604.333.3GYM toll free: 800.556.2242  
info@gymnastics.bc.ca www.gymnastics.bc.ca

DESCRIPTION OF ACTIVITY: **Gymnastics**

DATE & TIMES: **Tuesday April 8, 15 and 29 \*leave @ 1:00 & back by 3:00pm AND May 6<sup>th</sup> 9:00-10:45**

SUPERVISING TEACHER: **Ms. Wilson**

In signing this permission form, I indicate that I understand the nature of the activity and its inherent risks and approve of the arrangements outlined above. I give my permission for my son/daughter/ward to participate.

COST: **\$15.00 per student for all 4 sessions**

Please send a cheque or cash. Our office has a debit machine as well. Thank you!

Emergency contact: \_\_\_\_\_ Number: \_\_\_\_\_

Date: \_\_\_\_\_ Name of Child \_\_\_\_\_

\_\_\_\_\_  
Signature of parent/guardian

\_\_\_\_\_  
telephone number